**Faculty Recommendation Form**

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| --- | --- | --- | --- | --- |
| **Faculty Name** |  |  | **Department/Division** |  |
|  |
| **Faculty Start Date** |  |  | **Tenure Date (if applicable)** |  |

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| Faculty evaluations: (Please summarize completed faculty evaluations indicating strengths and weaknesses. Please list how identified weaknesses have been addressed.)  |
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| Enrollments: Do enrollment trends justify renewing the instructor’s contract? (Indicate FTE taught each academic year – comment on causes of low FTE and reasons to justify continued employment if appropriate.)  |
|  |
| Other Comments: |
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| --- | --- |
| Executive Director or Director Recommendation:* Renew Contract
* Non-Renewal
* Grant Tenure (if applicable)
 |  |
|  | Signature  | Date |
| Dean Recommendation:* Renew Contract
* Non-Renewal
* Grant Tenure (if applicable)
 |  |
|  | Signature | Date |
| Vice President of Instruction Recommendation:* Renew Contract
* Non-Renewal
* Grant Tenure (if applicable)
 |  |
|  | Signature | Date |
| Vice President of Instruction Comments: |